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### Form **990-PF**

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

		f foundation				A Employer identification	number
τ-	\_N	WACCONED C	7 ET MA WACC	אובים בירווווי אידר	ON	65-6141632	
DON WAGGONER & ZELMA WAGGONER FOUNDATION  Number and street (or P O box number if mail is not delivered to street address)  Room/suite					B Telephone number	<u> </u>	
		2 GORDON RIV		<u>-</u> <b>,</b>		239-263-28	0.4
		own, state or province, cour		nostal code	L	C If exemption application is p	
		LES, FL 341		posiai oodo		The exemption application is p	ending, cristic P
			Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	s, check here
•	511001	· · · · · · · · · · · · · · · · · · ·	Fınal return	Amended return	, , , , , , , , , , , , , , , , , , , ,		
		===	Address change	Name change		2 Foreign organizations me check here and attach co	eting the 85% test,
Н (	Check			xempt private foundation		E If private foundation sta	
Ï				Other taxable private found	ation	under section 507(b)(1)	
I F		arket value of all assets at er			Accrual	F If the foundation is in a	
		Part II, col (c), line 16)		Other (specify)		under section 507(b)(1)	
	\$	8,722	, 854 . (Part I, col	umn (d) must be on cash	basis)	,	
Pi	art l	Analysis of Revenue and	Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		(The total of amounts in colum necessarily equal the amounts	ins (b), (c), and (d) may not s in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants	, etc., received	2,000,000.		N/A	
	2	<u> </u>	is not required to attach Sch. B				
	3	Interest on savings and tempora cash investments	ary	30,588.	30,588.		STATEMENT 1
	4	Dividends and interest from	n securities	129,525.	129,525.		STATEMENT 2
	5a	Gross rents					
	b	Net rental income or (loss)					
ø	6a	Net gain or (loss) from sale of as		<142,292.	<u> </u>	<del></del>	
ne Due	b	Gross sales price for all assets on line 6a	<u>9,833,450.</u>			RECEIVED	
Revenue	7	Capital gain net income (from P.	art IV, line 2)		0.		<u> </u>
ш	8	Net short-term capital gain			3080		SC
	9	Income modifications Gross sales less returns			(7)	)	\\ \frac{\sqrt{\sq}}}}}}}\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}
	10a	and allowances				OCDER UT	
		Less Cost of goods sold			<u> </u>	003213, 31	
		Gross profit or (loss)		642.	642.	<u></u>	STATEMENT 3
	11	Other income	.11	2,018,463.	160,755.		SIATEMENT 5
	12	Total Add lines 1 through  Compensation of officers, direct		0.	0.		0.
	14	Other employee salaries an					
	15	Pension plans, employee b	=				
ses		Legal fees					
ens	'OB	Accounting fees	STMT 4	9,675.	4,838.		0.
Expens	[	Other professional fees	STMT 5	75,121.	57,721.		2,900.
Ve E	17	Interest					
GENERAL DE PROPERTIE DE PROPERT	18	Taxes	STMT 6	2,175.	215.		0.
	19	Depreciation and depletion					
<b>\$</b> \$\bar{\text{E}}	20	Occupancy		3,600.	0.		0.
Z	21	Travel, conferences, and m	neetings	413.	0.		0.
CANNED and Administra	22	Printing and publications					
_		Other expenses	STMT 7	113.	0.		0.
© & AVW Operating	24	Total operating and admir	nistrative				
<b>2</b> 6		expenses. Add lines 13 thi	rough 23	91,097.	62,774.		2,900.
U	25	Contributions, gifts, grants		200,076.		-	200,076.
2	26	Total expenses and disbu	rsements	004 475	60:		000 056
2016	<u> </u>	Add lines 24 and 25		291,173.	62,774.	<u> </u>	202,976.
	27	Subtract line 26 from line	12:	1 707 000			
		Excess of revenue over expense		1,727,290.	07 001		
		Net investment income (if			97,981.	NT / N	
5226		Adjusted net income (if neg	gative, enter -0-)		l <u> </u>	N/A	5 000 DE (00.45)

D	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
Par	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
	Savings and temporary cash investments	1,714,111.	2,548,916.	2,534,566.
	_	1,,13,111	2/310/310	2733173331
3	Accounts receivable -	1		
	Less: allowance for doubtful accounts			
4				
1	Less: allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7				
'	Less: allowance for doubtful accounts	i		
	· · · · · · · · · · · · · · · · · · ·			
Assets	Inventories for sale or use		3,520.	
Ass   9	· · · ·		3,340.	
10	a Investments - U.S. and state government obligations		5 440 404	6 100 150
ļ	b Investments - corporate stock STMT 8	4,549,811.	5,442,434.	6,188,159.
	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other			
	Land, buildings, and equipment: basis ► 1,200.			
14	Less accumulated depreciation STMT 9 \( \) 1,200.			
	<del></del>	139.	129.	129.
15	Other assets (describe STATEMENT 10)	139.	149.	149.
16	,		m 004 000	0 500 054
	instructions. Also, see page 1, item I)	6,264,061.	7,994,999.	8,722,854.
17	Accounts payable and accrued expenses	1,099.		
18	Grants payable			
ي 19	Deferred revenue			
Liabilities 02 12 21 22 22 22 22 22 22 22 22 22 22 22	Loans from officers, directors, trustees, and other disqualified persons			
e 21	Mortgages and other notes payable		***	
ii   23	Other liabilities (describe >		<del>-</del>	
22	Office Habilities (describe			
00	Tatal liabilities (add lines 17 through 22)	1,099.	0.	
23	Total liabilities (add lines 17 through 22)	1,000.		
	Foundations that follow SFAS 117, check here			
ဖ	and complete lines 24 through 26 and lines 30 and 31.	İ		
월 24	Unrestricted			
<u>គ</u> 25	Temporarily restricted			
B   26	Permanently restricted			
מַ	Foundations that do not follow SFAS 117, check here			
로	and complete lines 27 through 31	1		
Ö 27	Capital stock, trust principal, or current funds	0.	0.	
Se 58	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SSA 29	Retained earnings, accumulated income, endowment, or other funds	6,262,962.	7,994,999.	
# 50		6,262,962.	7,994,999.	
₹  30	Total net assets or fund balances	0,202,902.	1,374,333.	
		C 2C4 0C1	7 004 000	
31	Total liabilities and net assets/fund balances	6,264,061.	7,994,999.	
Part	Analysis of Changes in Net Assets or Fund Ba	lances		
1 Tota	al net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
(mı	st agree with end-of-year figure reported on prior year's return)		1	6,262,962.
2 Ente	er amount from Part I, line 27a		2	1,727,290.
<b>3</b> Oth	er increases not included in line 2 (itemize) ADJUSTMENT T	O FMV OF STOC	K GIFTED 3	4,747.
	lines 1, 2, and 3		4	7,994,999.
	reases not included in line 2 (itemize)		5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	7,994,999.
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	WAGGONER &			NDATION	6	5-6141	L632	Page 3
<u> </u>	and Losses for Ta		t Income	(b) How acquired	(a) Data	acquired	(d) Dat	n cold
2-story brick w					day, yr.)	(mo., da		
1a								
b SEE ATTACHED	STATEMENTS							
<u>C</u>								
d e		-		-				
(e) Gross sales price	(f) Depreciation allow (or allowable)		st or other basis expense of sale			Gain or (loss) s (f) minus (q	])	
<u>a</u>					-			
<u>b</u>		-						
<u>c</u> d								
e 9,833,450.			9,975,74	2.			<142	,292.
Complete only for assets shown	ng gain in column (h) and c	wned by the foundation	n on 12/31/69			Col. (h) gain r	ninus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 1 1	col. (j), if any	col.		not less than (from col. (h		,·
<u>a</u>								
b C								
d	, , , , , , , , , , , , , , , , , , ,		·····				-	
e						·	<142	,292.
2 Capital gain net income or (net ca		also enter in Part I, line , enter -0- in Part I, line		} 2			<142	,292.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,		222(5) and (6):		3				
If (loss), enter -0- in Part I, line 8		Val for Dadugad	Toy on Not			N/A		
<u> </u>	Inder Section 4940				onie		· · · · ·	
(For optional use by domestic private	e toutidations subject to the	section 4940(a) tax on	i net mveziment m	some.)				
If section 4940(d)(2) applies, leave to	hıs part blank.							
Was the foundation liable for the sec If "Yes," the foundation does not qua	lify under section 4940(e).	Do not complete this pa	art.			_	Yes	X No
1 Enter the appropriate amount in	each column for each year;	see the instructions be	fore making any er	ntries.	<del></del>			
(a) Base period years Calendar year (or tax year beginni	ng in) Adjusted qual	(b) Ifying distributions	Net value of nor	(c) ncharitable-use assets		Distribu (col. (b) divid		
2014		93,833.		5,249,834				17874
2013		757,510.		3,800,091				99340
2012		625,518. 618,465.		3,953,970 4,472,839		<del></del>		<u>58200</u> 38271
2010		274,299.		4,406,089		<del></del>		62255
	L-					<u> </u>		
2 Total of line 1, column (d)					2		.5	759 <u>40</u>
3 Average distribution ratio for the		the total on line 2 by 5,	or by the number	of years	ľ			
the foundation has been in existe	nce if less than 5 years				3		• 1.	<u> 15188</u>
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			4	8	3,601	,034.		
5 Multiply line 4 by line 3			_5		990	<u>,736.</u>		
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)				6			980.
7 Add lines 5 and 6					7		991	,716.
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions.		rt VI, line 1b, and comp	olete that part using	a 1% tax rate	8		202	,976.
See the Fait VI moductions.	<del>.</del> .		<del></del>			۲.	rm QQA I	DE (2015)

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	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec		JCHO	115)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here     1   1		1,9	60.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
3	Add lines 1 and 2		<u>1,9</u>	60.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		1,9	60.
	Credits/Payments:			
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 5, 480.			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)  6c			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d		5,4	80.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10		3.5	20.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax   3,520 Refunded  11			0.
	int VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
Ia	any political campaign?	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1		
	distributed by the foundation in connection with the activities	ļ		
	·	1c		x
-	Did the foundation file Form 1120-POL for this year?	10	1	
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation.   \$\int \text{ 0.} \text{ (2) On foundation managers.} \int \text{ 0.}		ļ	
		ĺ	}	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	İ	ļ	
_	managers. ▶ \$ 0.		İ	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	ļ	<u> </u>
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	$\vdash$	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b	+	v
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	1	<u>X</u>
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or	-		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		1,7	
	remain in the governing instrument?	6	X	_
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	├─
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-	1	ŀ
	FL OCCUPATION OF THE PROPERTY	-		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			17
	of each state as required by General Instruction G? If "No," attach explanation SEE STATEMENT 11	- <u>8b</u>	<del> </del>	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	<del> </del>	X
10		10	<u> </u>	X
		Form <b>99</b>	ひ-ピト	(2015)

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had not been removed from jeopardy before the first day of the tax year beginning in 2015?

Part VII-B Statements Regarding Activities for Which I			05-01410	34	Page 6	
5a During the year did the foundation pay or incur any amount to:	om way be	rioquirea (contin	deu)		$\overline{}$	
(1) 'Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?						
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,						
any voter registration drive?						
(3) Provide a grant to an individual for travel, study, or other similar purposes?						
(4) Provide a grant to an organization other than a charitable, etc., organization described in section						
4945(d)(4)(A)? (see instructions)						
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for						
the prevention of cruelty to children or animals?						
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations						
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b		
Organizations relying on a current notice regarding disaster assistance check h	•		▶□□□			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	iined				
expenditure responsibility for the grant?	Ŋ	J/A 🔲 Ye	es No			
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to						
a personal benefit contract?		Ye	es X No		l	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X	
If "Yes" to 6b, file Form 8870						
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 📙			
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b		
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	У			
Paid Employees, and Contractors						
List all officers, directors, trustees, foundation managers and their		(a) Componentian	(d) Contributions to	1		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	accou	xpense int, other	
ONALD E MAGGONED	to position	enter-U-)	compensation	allov	wances	
	TRUSTEE					
252 GORDON RIVER TRAIL	0.00	0.	0.		0	
NAPLES, FL 34105 ZELMA WAGGONER	TRUSTEE	ļ	0.		<u> </u>	
.252 GORDON RIVER TRAIL	IKOSIEE					
IAPLES, FL 34105	0.00	0.	0.		0.	
ARIDES, ID SHIOS	0.00	1			<u> </u>	
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other	
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allov	vances	
NONE						
					_	
		<u> </u>				
	<del></del>					
		<u> </u>		L		
otal number of other employees paid over \$50,000					0	
			Form	990-P	<b>F</b> (2015)	

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Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)			
3 Five highest-paid independent contractors for professional services. If none, enter			
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) (	Compensation
RONALD G TRAMMEL - 25 WOODS LAKE ROAD, STE		_	
306, GREENVILLE, SC 29607	MANAGEMENT SERV	ICES 5	8,000.
	_		
			<del></del>
	4		
	_		
Total number of others receiving over \$50,000 for professional services		<b>&gt;</b>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers produced.	cal information such as the uced, etc.	Expe	nses
1 N/A			——————————————————————————————————————
2			
		_	
		<del></del>	<del></del>
3			
A			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on I	ines 1 and 2.	Amo	unt
1 N/A		_	
2	···		
· · · · · · · · · · · · · · · · · · ·			
All other program-related investments. See instructions.			
3			
		_]	
Total, Add lines 1 through 3	<u> </u>	<b>&gt;</b>	0.

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DON WAGGONER & ZELMA WAGGONER FOUNDATION 65-6141632 Form 990-PF (2015) Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 7,639,177. a Average monthly fair market value of securities 1a 1b 1.092.837. b Average of monthly cash balances c Fair market value of all other assets 10 8,732,014. 1đ d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 8,732,014. 3 Subtract line 2 from line 1d 130,980. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 8,601,034. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 5 430,052. Minimum investment return Enter 5% of line 5 Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 
and do not complete this part.) 430,052. Minimum investment return from Part X, line 6 1,960. Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) 2b 1,960. 2c Add lines 2a and 2b 428,092. Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 092. Add lines 3 and 4 5 0. 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 428. 092. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 202,976. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3ь 202,976. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4 Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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income. Enter 1% of Part I, line 27b

Part XIII Undistributed Income (see instructions)

·				
	(a) Corpus	(b) Years prior to 2014	(c) 2014	( <b>d)</b> 2015
1 Distributable amount for 2015 from Part XI,	00.700	10000 40000 0000		20.0
line 7				428,092.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
<b>b</b> Total for prior years:			•	
,,,		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011 293, 959.				
c From 2012 431,309.				
d From 2013 571,307.				
e From 2014	1 006 555			
f Total of lines 3a through e	1,296,575.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 202,976.			0	
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		<u></u>
c Treated as distributions out of corpus	· ,			
(Election required - see instructions)	0.			202,976.
d Applied to 2015 distributable amount	0.			202,970.
e Remaining amount distributed out of corpus	225,116.			225,116.
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	225,110.			223,110.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,071,459.	<u> </u>	<b></b>	
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which			,	
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions	<del></del>	0.	-	
e Undistributed income for 2014. Subtract line			_	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2010			<u> </u>	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016				·
Subtract lines 7 and 8 from line 6a	1,071,459.			
10 Analysis of line 9:				
a Excess from 2011 68,843.				
b Excess from 2012 431, 309.		İ		
c Excess from 2013 571, 307.				
d Excess from 2014				
e Excess from 2015			<u> </u>	

Part XIV Private Operating For		JMA WAGGUNER structions and Part VII		N/A	41032 Fage 10			
			7., question 5)	N/A				
1 a If the foundation has received a ruling of								
foundation, and the ruling is effective for		•		1040(1)(2) or 1 40	40/.\/E\			
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)  2 a Enter the lesser of the adjusted net Tax year Prior 3 years								
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total			
income from Part I or the minimum	(a) 2013	(0) 2014	(0) 2010	(4) 2012	(c) rotat			
investment return from Part X for								
each year listed		<del> </del>			- <u> </u>			
<b>b</b> 85% of line 2a		<del> </del>						
c Qualifying distributions from Part XII,								
line 4 for each year listed	-							
d Amounts included in line 2c not								
used directly for active conduct of								
exempt activities								
e Qualifying distributions made directly				İ				
for active conduct of exempt activities.								
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		<del> </del>						
alternative test relied upon:								
a "Assets" alternative test - enter:								
(1) Value of all assets			<del></del>					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			<u>-</u>					
<b>b</b> "Endowment" alternative test - enter								
2/3 of minimum investment return shown in Part X, line 6 for each year listed								
c "Support" alternative test - enter:	·							
(1) Total support other than gross				1				
investment income (interest,								
dividends, rents, payments on securities loans (section								
512(a)(5)), or royalties)				-				
(2) Support from general public								
and 5 or more exempt								
organizations as provided in section 4942(j)(3)(B)(iii)								
(3) Largest amount of support from								
an exempt organization								
(4) Gross investment income								
Part XV Supplementary Info			f the foundation	n had \$5,000 or mo	re in assets			
at any time during the	ne year-see inst	ructions.)						
1 Information Regarding Foundation	n Managers:							
a List any managers of the foundation who			ibutions received by the	e foundation before the clos	e of any tax			
year (but only if they have contributed m	ore than \$5,000). (See s	section 507(d)(2).)						
SEE STATEMENT 12				n.				
<ul> <li>b List any managers of the foundation who other entity) of which the foundation has</li> </ul>			or an equally large port	ion of the ownership of a pa	rtnership or			
NONE								
2 Information Regarding Contribution	on, Grant, Gift, Loan	, Scholarship, etc., Pro	ograms:					
Check here ► X if the foundation or								
the foundation makes gifts, grants, etc. (	see instructions) to indi	viduals or organizations ur	nder other conditions, o	complete items 2a, b, c, and	d.			
a The name, address, and telephone numb	er or e-mail address of	the person to whom applic	cations should be addre	essed:				
<b>b</b> The form in which applications should be	e submitted and informa	tion and materials they sh	ould include:					
c Any submission deadlines;		<del></del>	<del></del>					
d Any rootypeters as limited as a second	auch oo by access	al arono, obsertable fields	unde of institutions ==	other factors				
d Any restrictions or limitations on awards	, such as by geographic	ai areas, charitable fields, l	kinus or institutions, or	omer lactors				

a Paid during the year

AMERICAN RED CROSS

GREENVILLE, SC 29604

PO BOX 9035

424 E 92ND ST

NEW YORK, NY 10128

CHAPIN HIGH SCHOOL

300 COLUMBIA AVE

**ASPCA** 

Recipient

DON WAGGONER & ZELMA WAGGONER FOUNDATION 65-6141632 Page 11 Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient NONE PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE ORGANIZATION. 10,000. NONE PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE ORGANIZATION 500. NONE PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE ORGANIZATION 7,000.

PROGRAMS OF THE

ORGANIZATION

CHAPIN, SC 29036 NONE CHAPIN WE CARE CENTER PUBLIC CHARITY TO FURTHER THE PO BOX 491 PROGRAMS OF THE CHAPIN, SC 29036 ORGANIZATION 1,000. DAV CHARITABLE SERVICE TRUST NONE PUBLIC CHARITY TO FURTHER THE

CONTINUATION SHEET(S) Total 3a 200,076. b Approved for future payment

NONE

3725 ALEXANDRIA PIKE

COLD SPRINGS KY 41076

Form 990-PF (2015)

500

Total

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)
Program service revenue.	(a) Business code	( <b>b)</b> Amount	Exclu- sion code	(d) Amount	Related or exempt function income
_	Code		code		
ab			<u> </u>		
		<del>.</del>			
e			<del> </del>		
g Fees and contracts from government agencies					
Membership dues and assessments					
3 Interest on savings and temporary cash			<del> </del>		
investments			14	30.588	
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:					
a Debt-financed property					<del></del>
b Not debt-financed property					•
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	642.	
8 Gain or (loss) from sales of assets other					
than inventory			18	<142,292.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		18,463.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	18,463.
(See worksheet in line 13 instructions to verify calculations.)					·
Part XVI-B Relationship of Activities to	the Acco	mplishment of Ex	emp	t Purposes	
		· · · · · · · · · · · · · · · · · · ·			
Line No. Explain below how each activity for which incom			contrit	outed importantly to the accom-	plishment of
the foundation's exempt purposes (other than b	by providing fur	ids for such purposes).			
	···				
				<del></del>	
					<del> </del>
				·	
				·	
				<del></del>	
		_ <del>_</del>		<u>-</u>	
		<del> </del>			<del></del>
	·	<del></del>		<del></del>	
				<del></del>	<del></del>
		<del></del>			

Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Date Check self- employed Paid DERON B. STANCIL P00221718 Preparer Firm's name ► ELLIOTT DAVIS DECOSIMO Firm's EIN > 57-0381582 Use Only Firm's address ► PO BOX 6286 SC 29606-6286 GREENVILLE, Phone no 864-242-3370

TRUSTEE

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

2015

DO	ON WAGGONER & ZELMA WAGGONER FOUNDATION	65-6141632						
Organization type (check of		00 0111001						
Filers of:	ilers of: Section:							
Form 990 or 990-EZ	501(c)( ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling rone contributor Complete Parts I and II See instructions for determining a contributor's							
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II								
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III								
year, contributions is checked, enter h purpose Do not co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.							
out it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its For the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

#### DON WAGGONER & ZELMA WAGGONER FOUNDATION

65-6141632

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	DON AND ZELMA WAGGONER  1252 GORDON RIVER TRAIL N.  NAPLES, FL 34105	\$ 2,000,000.	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Occash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Oncash Complete Part II for noncash contributions )				
3452 10-26	-15	Schedule B (Form	990, 990-EZ, or 990-PF) (2015)				

Name of organization

Employer identification number

#### DON WAGGONER & ZELMA WAGGONER FOUNDATION

65-6141632

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		  \$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		\$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		\$	00 000 E7 or 000 BE) (2015)				

Name of organization

Employer identification number

ti c	he year from any one contributor. Complete completing Part III, enter the total of exclusively religious by Eduplicate copies of Part III if addition	columns (a) through (e) and the follow us, charitable, etc., contributions of \$1,000 or i	In section 501(c)(7), (8), or (10) that total more than \$1,0 rung line entry. For organizations \$\infty\$ s the year (Enter this info once) \$\infty\$
	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	(5), 6,500 0, 911	(5) 550 of gift	(a) sees thus of now gire is field
		(e) Transfer of gift	
	Transferee's name, address, a		Relationship of transferor to transferee
	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	

•	CONTE		, 000 pm	DADEL TV
DON WAGGONER & ZELMA WAGGON		NUATION FOR	PAGE 1	
Part IV Capital Gains and Losses for Tax on Investm		141032 1	AGE I	
(a) List and describe the kind(s) of 2-story brick warehouse; or comi	property sold, e.g., real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr.)
1a S/T COVERED ML 743-04014		P		
b ML 743-04014 WASH SALE		P		
c S/T NONCOVERED ML 743-040	)14	P		
d L/T COVERED ML 743-04014		P		
e ML 743-04014 WASH SALE		P		
L/T NONCOVERED ML 743-040		<u> </u>		· · · · · · · · · · · · · · · · · · ·
g ML 743-04014 CASH IN LIEU	)	P	<u> </u>	
h ST COVERED ML 743-04225 LT COVERED ML 743-04225		P		
ST COVERED ML 743-04225		P		
k ML 743-04015 WASH SALE		P		
LT COVERED ML 743-04015		P		
m LT NONCOVERED ML 743-0401	.5	P		
n ST COVERED FIDELITY Z47-9	061669	P		
o FIDELITY Z47-961669 WASH	SALE	P		
(e) Gross sales price (f) Depreciation at (or allowable		(e) p	) Gain or (loss) dus (f) minus (g)	· <del>_</del>
a 590,203.	570,956.			19,247.
b 446.				446.
<u>c 584.</u>	584.			0.
d 419,211.	385,840.			33,371.
e 1,537. f 15,382.	6,051.			1,537. 9,331.
A 1	6,051.			41.
h 265,174.	301,197.	-		<36,023.>
235,132.	305,572.			<70,440.>
184,841.	200,654.			<15,813.>
k 276.				276.
298,017.	291,165.			6,852.
m 38,737.	8,137.			30,600.
n 7,716,645.	7,904,237.		<:	<u>187,592.</u> >
o 2,054.	d award by the foundation on 10/01/00			2,054.
Complete only for assets showing gain in column (h) an			ses (from col. (h)) of col. (h) gain over	col (k)
(i) F.M.V as of 12/31/69 (j) Adjusted ba as of 12/31/6			ot less than "-0-")	
<u>a</u>		<del> </del>		19,247. 446.
<u>b</u> <u>c</u>				0.
d				33,371.
е			-	1,537.
f				9,331.
g				41.
h				<36,023.>
1				<70,440.>
<del></del>				<15,813.>
<u>k</u>				276. 6,852.
m				30,600.
m n				187,592.>
0				2,054.
2 Capital gain net income or (net capital loss) { If gai	n, also enter in Part I, line 7 ss), enter "-0-" in Part I, line 7 }	2		
3 Net short-term capital gain or (loss) as defined in sections if gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	_	3		

## DON WAGGONER & ZELMA WAGGONER FOUNDATION Part IV | Capital Gains and Losses for Tax on Investment Income

(a) List and	d describe the kind(s) of property soli rick warehouse; or common stock, 20	d, e.g., real estate, 00 shs MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo., day, yr.)
1a ST NONCOVERED	FIDELITY Z47-961	669	P		
	ACCESS LTD		P		
С			P		····
d			P		
e		· · · · · · · · · · · · · · · · · · ·	P		
f		•	P		
	· · · · · · · · · · · · · · · · · · ·	<del>-</del>	P		
<u>g</u> h			P		<del></del>
			P		<del></del>
	<del></del>		P		
k CAPITAL GAINS	DIVIDENDO	<del>-</del>			<del></del>
K CAFITAL GAINS	DIVIDENDS				<del></del>
					<del></del>
<u>m</u>					<del></del>
<u>n</u>					<del></del>
0	I				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) (a) n	Gain or (loss) lus (f) minus (g)	
472	(or anowabie)		(e) b	(y)	
a 473.		472.		-	1.
b 837.		877.			<u>&lt;40.</u> >
С					0.
d					0.
е				,	0.
<u>f</u>					0.
g					0.
h					0.
1					0.
J					0.
k 63,860.					63,860.
1					
m					
n j					
0				- 11	
Complete only for assets showing	ng gain in column (h) and owned by t	ne foundation on 12/31/69	(I) Loss	ses (from col. (h))	
(ı) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (ı), ıf any	Gains (excess o	f col. (h) gain over ot less than "-0-")	coi. (k),
a					1.
b					<40.>
С					0.
d				<u> </u>	0.
e					0.
f					0.
g	-				0.
h			<del></del>		0.
1			<del></del>		0.
			· · · · · · · · · · · · · · · · · · ·		0.
k			······		63,860.
					557000.
m					
n					<del></del>
0					
2 Capital gain net income or (net ca	pital loss) {   If gain, also enter i   If (loss), enter *-0-'	n Part I, line 7 'in Part I, line 7	2	<1	.42,292.>
If gain, also enter in Part I, line 8,	s) as defined in sections 1222(5) and column (c).	(6):			
If (loss), enter "-0-" in Part I, line 8	· · · · · · · · · · · · · · · · · · ·		3	N/A	

# DON WAGGONER & ZELMA WAGGONER FOUNDATION 65-6141632 Part XV | Supplementary Information

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				1
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	00/14/15/15/17	
DAYS FOR GIRLS	NONE	PUBLIC CHARITY	TO FURTHER THE	
1610 GROVER ST, ST B22			PROGRAMS OF THE	1
LYNDEN, WA 98264		<u> </u>	ORGANIZATION,	500.
FOUNDATION FOR WOMEN'S CANCER	NONE	PUBLIC CHARITY	TO FURTHER THE	
230 WEST MONROE SUITE 2528			PROGRAMS OF THE	
CHICAGO, IL 60606		<u> </u>	ORGANIZATION.	1,000.
GIRL SCOUTS OF AMERICA	NONE	PUBLIC CHARITY	TO FURTHER THE	
5 INDEPENDENCE POINTE, STE 120			PROGRAMS OF THE	
GREENVILLE SC 29615			ORGANIZATION.	1,000.
GREENVILLE FIRST CHURCH OF NAZARENE	NONE	PUBLIC CHARITY	TO FURTHER THE	
1201 HAYWOOD RD	[		PROGRAMS OF THE	
GREENVILLE, SC 29615			ORGANIZATION.	80,576.
HABITAT FOR HUMANITY OF COLLIER	NONE	PUBLIC CHARITY	TO FURTHER THE	
COUNTY 11145 TAMIAMI TRAIL EAST			PROGRAMS OF THE ORGANIZATION.	
NAPLES FL 34113			DRGANIZATION.	50,000.
THE MUDDIN OF THE WAY AND A COUNTY	NOVE	DUDI IA GUADINI	TO TUDBULED WITH	
LAKE MURRAY ELEMENTARY SCHOOL 1531 THREE DOG RD	NONE	PUBLIC CHARITI	TO FURTHER THE PROGRAMS OF THE	
CHAPIN SC 29036			ORGANIZATION.	2,000.
A TANDAMONID GOLL DOD	NONE	DUDI TO GUADIEN	TO DUDGUED MILE	
LIMESTONE COLLEGE 1115 COLLEGE DRIVE	NONE	PUBLIC CHARITY	PROGRAMS OF THE	
GAFFNEY SC 29340			ORGANIZATION.	2,000.
MELANOMA RESEARCH FOUNDATION	NONE	PUBLIC CHARITY	PROGRAMS OF THE	
1411 K STREET NW, SUITE 800 WASHINGTON, DC 20005			ORGANIZATION.	1,000.
WASHINGTON, DO 20005			Sittle and the sittle	1,000.
METROPOLITAN ARTS COUNCIL	NONE	PUBLIC CHARITY		
16 AUGUSTA ST GREENVILLE SC 29601			PROGRAMS OF THE DRGANIZATION.	14,000.
ONDERTY LUBB., OC 87001			DAGINIBRITON.	14,000.
PAWMETTO LIFELINE	NONE	PUBLIC CHARITY		
1275 BOWER PARKWAY			PROGRAMS OF THE	500
COLUMBIA SC 29212 Total from continuation sheets		1	DRGANIZATION.	500. 181.076.

DON WAGGONER & ZELMA WAGGONER FOUNDATION 65-6141632

Part XV | Supplementary Information

SLOW FOOD SC-UPSTATE  10 OLD TYLER CT  GREENVILLE, SC 29615  SOUTH CAROLINA AUTISM SOCIETY  MONE  PUBLIC CHARITY TO FURTHER THE  PROGRAMS OF THE  ORGANIZATION.  FUBLIC CHARITY TO FURTHER THE  PROGRAMS OF THE  ORGANIZATION.  1,000.	Part XV Supplementary Informatio				
Name and address (home or business)  Show any relationship to any bundation in marging of substantial contribution	3 Grants and Contributions Paid During the	Year (Continuation)		.,	
NAME and address (nome of business)  of substantial condition  SALVATION ARMY  SALVATION ARMY  10 NOME  PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE DEGAMATION.  10,000.  SANDALS FOUNDATION  SANDALS FOUNDATION  SANDALS FOUNDATION  NOME  PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE DEGAMATION.  1,500.  SLOW FOOD SC-UPSTATE  10 OLD TILER CT  SERVILLE SC 29615  NOME  PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE DEGAMATION.  1,500.  SOUTH CAROLINA AUTISM SOCIETY  806 12TH STREET  WEST COLUMBIA, SC 29169  NOME  PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE DEGAMATION.  1,000.  SEPCIAL L INK FOUNDATION  SEPCIAL L INK FOUNDATION  ORDER  PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE DEGAMATION.  1,000.  SEPCIAL L INK FOUNDATION  ORDER  PUBLIC CHARITY  FOR PURTHER THE PROGRAMS OF THE DEGAMATION.  1,000.  SEPCIAL L INK FOUNDATION  ORDER  PUBLIC CHARITY  FOR PURTHER THE PROGRAMS OF THE DEGAMATION.  1,000.  SEPCIAL L INK FOUNDATION  ORDER  PUBLIC CHARITY  FOR P		show any relationship to		Purpose of grant or	Amount
A17 RUTHERFORD ST  GREENVILLE, SC 29609  NONE  PUBLIC CHARITY  FROGRAMS OF THE  PROGRAMS OF	Name and address (home or business)	or substantial contributor		Contribution	, who did
A17 RUTHERFORD ST  GREENVILLE, SC 29609  NONE  PUBLIC CHARITY  FROGRAMS OF THE  PROGRAMS OF					
A17 RUTHERFORD ST  GREENVILLE, SC 29609  NONE  PUBLIC CHARITY  FROGRAMS OF THE  PROGRAMS OF					
GREENVILLE SC 29609  SANDALS FOUNDATION  NONE  PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE ORGANIZATION.  1,500.  SLOW FOOD SC-UPSTATE  10 OLD TYLER CT  GREENVILLE SC 29615  SOUTH CAROLINA AUTISM SOCIETY  806 127H STREET  WEST COLUMBIA, SC 29169  SPECIAL L INK FOUNDATION  SOUNE  PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE DRAWLZATION.  1,000.  SPECIAL L INK FOUNDATION  SOUNE  PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE DRAWLZATION.  1,000.  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUNE  PUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE DRAWLZATION.  1,000.  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUNE  SPECIAL L INK FOUNDATION  SOUND SPECIAL L IN		NONE	PUBLIC CHARITY	1	
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4950 SW 72ND AVENUE  MIAMI, FL 33155  SLOW FOOD SC-UPSTATE 10 OLD TYLER CT  GREENVILLE, SC 29615  SOUTH CAROLINA AUTISM SOCIETY 806 12TH STREET  WEST COLUMBIA, SC 29169  NONE  FUBLIC CHARITY TO FURTHER THE FROGRAMS OF THE DRGANIZATION.  6,000.  SPECIAL L INK FOUNDATION 1201 HAYWOOD RD GREENVILLE, SC 29615  RONE  FUBLIC CHARITY FO FURTHER THE FROGRAMS OF THE DRGANIZATION.  1,000.	GREENVILLE, SC 29609			ORGANIZATION.	10,000.
4950 SW 72ND AVENUE  MIAMI, FL 33155  SLOW FOOD SC-UPSTATE 10 OLD TYLER CT  GREENVILLE, SC 29615  SOUTH CAROLINA AUTISM SOCIETY 806 12TH STREET  WEST COLUMBIA, SC 29169  NONE  FUBLIC CHARITY TO FURTHER THE FROGRAMS OF THE DRGANIZATION.  6,000.  SPECIAL L INK FOUNDATION 1201 HAYWOOD RD GREENVILLE, SC 29615  RONE  FUBLIC CHARITY FO FURTHER THE FROGRAMS OF THE DRGANIZATION.  1,000.					
4950 SW 72ND AVENUE  MIAMI, FL 33155  SLOW FOOD SC-UPSTATE 10 OLD TYLER CT  GREENVILLE, SC 29615  SOUTH CAROLINA AUTISM SOCIETY 806 12TH STREET  WEST COLUMBIA, SC 29169  NONE  FUBLIC CHARITY TO FURTHER THE FROGRAMS OF THE DRGANIZATION.  6,000.  SPECIAL L INK FOUNDATION 1201 HAYWOOD RD GREENVILLE, SC 29615  RONE  FUBLIC CHARITY FO FURTHER THE FROGRAMS OF THE DRGANIZATION.  1,000.	SANDALS FOUNDATION	NONE	PUBLIC CHARITY	TO FURTHER THE	
SLOW FOOD SC-UPSTATE 10 OLD TYLER CT GREENVILLE, SC 29615  SOUTH CAROLINA AUTISM SOCIETY 806 12TH STREET WEST COLUMBIA, SC 29169  SPECIAL L INK FOUNDATION 1201 HAYWOOD RD GREENVILLE, SC 29615  SECURIAL SC 29615  NONE  FUBLIC CHARITY TO FURTHER THE PROGRAMS OF THE DRGANIZATION.  1 000.					
10 OLD TYLER CT GREENVILLE SC 29615  SOUTH CAROLINA AUTISM SOCIETY 806 12TH STREET 806 12TH STREET WEST COLUMBIA, SC 29169  SPECIAL L INK FOUNDATION 1,000,  SPECIAL L INK FOUNDATION 1201 HAYWOOD RD GREENVILLE, SC 29615  ROANIZATION. 10,000,	MIAMI, FL 33155	12 12 13		ORGANIZATION.	1,500.
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### PROGRAMS OF THE DRAWLATION, 1,000,  SPECIAL L INK FOUNDATION  SPEC	GREENVILLE, SC 29615			ORGANIZATION.	6,000.
### PROGRAMS OF THE DRAWLATION, 1,000,  SPECIAL L INK FOUNDATION  SPEC					
### PROGRAMS OF THE DRAWLATION, 1,000,  SPECIAL L INK FOUNDATION  SPEC	SOUTH CAROLINA AUTISM SOCIETY	NONE	PUBLIC CHARITY	TO FURTHER THE	
SPECIAL L INK FOUNDATION NONE PUBLIC CHARITY FO FURTHER THE PROGRAMS OF THE DRGANIZATION. 10,000.	806 12TH STREET			ľ	
1201 HAYWOOD RD GREENVILLE, SC 29615  GREENVILLE, SC 29615  PROGRAMS OF THE ORGANIZATION. 10,000.	WEST COLUMBIA, SC 29169			ORGANIZATION.	1,000.
1201 HAYWOOD RD GREENVILLE, SC 29615  GREENVILLE, SC 29615  PROGRAMS OF THE ORGANIZATION. 10,000.					
1201 HAYWOOD RD GREENVILLE, SC 29615  GREENVILLE, SC 29615  PROGRAMS OF THE ORGANIZATION. 10,000.					
GREENVILLE, SC 29615 ORGANIZATION. 10,000.	SPECIAL L INK FOUNDATION	NONE	PUBLIC CHARITY	1	
Total from continuation sheets	GREENVILLE, SC 29615			ORGANIZATION.	10,000.
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FORM 990-PF INTERE	ST ON SAVING	GS AND 7	rempor.	ARY CASI	IIN	VESTMENTS	ST	ATEMENT	1
SOURCE			(A) EVENUE R BOOK			(B) VESTMENT COME		(C) ADJUSTED ET INCOM	€
MERRILL LYNCH			30,5	88.	-	30,588.		· · ·	
TOTAL TO PART I, LI	NE 3		30,5	88.		30,588.			
FORM 990-PF	DIVIDENDS	INI DINA	EREST	FROM SE	CUR	ITIES	ST.	ATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	IS	(A) REVENU PER BOO		(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
MERRILL LYNCH	193,385.	63,	860.	129,5	25.	129,52	5.		
TO PART I, LINE 4	193,385.	63,	860.	129,5	25.	129,52	5 ·		
FORM 990-PF		OTHER	INCO	ИЕ			ST	ATEMENT	3
DESCRIPTION			REV	(A) /ENUE BOOKS		(B) ET INVEST- ENT INCOME		(C) ADJUSTEI NET INCOM	
OTHER INVESTMENT IN SECURITY LITIGATION INCOME		17		235		235			
NONDIVIDEND DISTRIB 743-04014	UTION ML			149 258		149 258			
TOTAL TO FORM 990-P	F, PART I, I	INE 11		642	<u> </u>	642		<del></del>	_

FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	9,675.	4,838.		0.
TO FORM 990-PF, PG 1, LN 16B	9,675.	4,838.		0.
FORM 990-PF C	THER PROFES	SIONAL FEES	S'	ГАТЕМЕНТ 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEES MERRILL LYNCH MANAGEMENT	58,000.	40,600.		2,900.
FEES	17,121.	17,121.		0.
TO FORM 990-PF, PG 1, LN 16C =	75,121.	57,721.		2,900.
FORM 990-PF	TAX	ES	S	PATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID EXCISE TAX PAID	215. 1,960.	215.		0.
<del>-</del>		215.	<del></del>	

FORM 990-PF	OTHER E	XPENSES			STATEMENT	7
	(A) KPENSES ER BOOKS			(C) ADJUSTEI NET INCON		
MISCELLANEOUS EXPENSES	113.	-	0.			0.
TO FORM 990-PF, PG 1, LN 23	113.		0.			0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	8
DESCRIPTION			вос	OK VALUE	FAIR MARKE	r
MERRILL LYNCH INV ACCTS PUBLICLY SECURITIES	TRADED	EQUITY	į	5,442,434.	6,188,1	59.
TOTAL TO FORM 990-PF, PART II, I	LINE 10B			5,442,434.	6,188,1	59.
FORM 990-PF DEPRECIATION OF AS	SSETS NOT	HELD FOR	INVI	ESTMENT	STATEMENT	9
DESCRIPTION		r OR Basis		JMULATED RECIATION	BOOK VALU	E
FURNITURE		1,200.		1,200.		0.
TOTAL TO FM 990-PF, PART II, LN	14	1,200.	·	1,200.		0.
FORM 990-PF	OTHER A	ASSETS			STATEMENT	10
DESCRIPTION		NING OF K VALUE		OF YEAR OK VALUE	FAIR MARKE'	Г
OUTSTANDING DIVIDENDS AND SALES		139.		129.	1:	29.
TO FORM 990-PF, PART II, LINE 15	5	139.		129.	1:	29.

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 8B STATEMENT 11

EXPLANATION

THE FOUNDATION IS NOT REQUIRED TO FILE A COPY OF FORM 990-PF WITH THE STATE OF FLORIDA.

FORM 990-PF PART XV - LINE 1A STATEMENT 12
LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

DONALD F WAGGONER ZELMA WAGGONER

2015 DEPRECIATION AND AMORTIZATION REPORT

ORM 9	FORM 990-PF PAGE 1						990-PF			ļ				
Asset No	Description	Date Acquired	Method	Lıfe	O c >	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
11	FURNITURE	04/27/07 200DB	200DB	7.00	HY17	1,200.				1,200.	1,200.		0	1,200.
	* TOTAL 990-PF PG 1 DEPR					1,200.				1,200.	1,200.		.0	1,200.
										-				
528111 04-01-15						(D) - Asset disposed	peso		*	ITC, Salvage,	Bonus, Comm	ercial Revita	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	ion, GO Zone